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TO: **Income Maintenance Supervisors  
Income Maintenance Lead Workers  
Income Maintenance Workers  
Training Staff  
Child Care Coordinators  
W-2 Agencies  
Workforce Development Boards  
Job Center Leads and Managers**

FROM: Amy Mendel-Clemens  
Technical Assistance, Training & Education  
Section  
Bureau of Eligibility Management  
Division of Health Care Financing

#### BEM/DWS OPERATIONS MEMO

No: 06-08

DATE: 01/31/06

FS	<input type="checkbox"/>	MA	<input checked="" type="checkbox"/>	SC	<input checked="" type="checkbox"/>
CTS	<input type="checkbox"/>	CC	<input type="checkbox"/>	W-2	<input type="checkbox"/>
FSET	<input type="checkbox"/>	EA	<input type="checkbox"/>	CF	<input type="checkbox"/>
JAL	<input type="checkbox"/>	JC	<input type="checkbox"/>	RAP	<input type="checkbox"/>
WIA	<input type="checkbox"/>	Other	EP	<input type="checkbox"/>	★

PRIORITY: HIGH

SUBJECT: **2006 Federal Poverty Level Changes**

**CROSS REFERENCE:** MEH 4.8.4, 5.16.7, 5.16.8, 5.16.9, 8.1.6

**EFFECTIVE DATE:** See specific dates below.

### PURPOSE

This memo provides local agencies with the 2006 Income Guidelines for Medicaid (MA) Programs. Below, are the updated tables, effective dates and cross references for these programs.

### BACKGROUND

The U.S. Department of Health and Human Services (DHHS) has published its annual update of the Poverty Income Guidelines (a.k.a., Federal Poverty Level, or FPL) in the Federal Register. These FPL guidelines are available at the following website: <http://aspe.dhhs.gov/poverty/index.shtml>. Income limits and other amounts used in eligibility determinations for some categories of Medicaid (MA) are based upon the FPL. The increase in the federal FPL will result in changes to the MA income limits as specified in this Operations Memo.

**POLICY**

Income limits and other amounts based upon the FPL will be effective on the dates provided below. The changes will be included in the next Medicaid Eligibility Handbook (MEH) release. When ongoing cases are updated in CARES with the new income limits, the first affected benefit month will be February 2006. As you become aware of cases that could have benefited from the higher limits in February, re-determine eligibility with the 2006 FPL limits listed below.

Medicare Buy-In categories and MAPP implement the 2006 FPL income limits on January 1, 2006. DHHS publishes the new FPL income limits after January 1. To prevent cases from closing before the higher FPL limits are published by DHHS and updated in CARES, the COLA increases that appear with the January checks are disregarded.

**NOTE ➤** To comply with Federal and State law the Spousal Impoverishment Community Spouse Income Allowance minimum allocation, Shelter Base Amount, and Spousal Impoverishment Family Member Income Allowance will not be effective until July 1, 2006.

**CARES**

CARES eligibility re-determinations will occur as part of the annual FPL mass change on the weekend of February 11, 2006 affecting the March benefit month. CARES tables TMEP, TBCS, TFPL, and TMST were updated January 30, 2006, immediately affecting eligibility for February forward. Any applications run on or after January 30, 2006 and any ongoing cases run with February dates will have eligibility determined using the 2006 FPL limits.

**MEDICARE BUY-INS, MEDICAID PURCHASE PLAN (MAPP) & COLA DISREGARD****Ongoing Cases**

In December 2005, the CARES COLA mass change stored the COLA increase on AFUI as "CURRENT DISREGARD". For cases run between January 1, 2006 and January 30, 2006, CARES subtracted the COLA increase from the client's income before comparing it to the eligibility income limits. In addition, CARES subtracted the "CURRENT DISREGARD" from the client's income before comparing it to the income limits for MAPP premiums.

For eligibility determinations run in CARES for February 2006 through December 2006 (on or after January 30th), EDBC will not subtract the COLA increase from total income when determining eligibility.

**New Applications**

New applications processed between January 1, 2006 and January 30, 2006, for Medicare Buy-In categories and MAPP should have had the 2006 COLA amount manually entered in the "Current Disregard" on AFUI. If entered, CARES subtracted the "Current Disregard" from an applicant's/recipient's income when determining eligibility for benefits and MAPP premium. For applications processed between January 1, 2006 and January 30, 2006 that did not have the "CURRENT DISREGARD" manually entered on AFUI and were denied for excess income, re-determine eligibility with the new 2006 FPL's upon the client's request.

SPOUSAL IMPOVERISHMENT AND COMMUNITY SPOUSE INCOME ALLOWANCE AND SPOUSAL IMPOVERISHMENT FAMILY MEMBER INCOME ALLOWANCE.

Changes to the Spousal Impoverishment Community Spouse Income Allowance minimum allocation, Shelter Base Amount, and Spousal Impoverishment Family Member Income Allowance will be effective July 1, 2006. A separate Operations Memo will be issued in May 2006 with these changed amounts. This memo will also describe the mass change planned to affect July benefits.

**QUALIFIED MEDICARE BENEFICIARY (QMB)**

Effective: 01/01/2006

Cross Reference: MEH 8.1.6

Group Size	OLD Limit (100%)	NEW Limit (100%)
1	\$797.50	<b>\$816.67</b>
2	\$1,069.17	<b>\$1,100.00</b>

**QUALIFIED DISABLED & WORKING INDIVIDUAL (QDWI)**

Effective: 01/01/2006

Cross Reference: MEH 8.1.6

Group Size	OLD Limit (200%)	NEW Limit (200%)
1	\$1,595.00	<b>\$1,633.33</b>
2	\$2,138.33	<b>\$2,200.00</b>

QDWI eligibility is determined in CARES.

**SPECIFIED LOW-INCOME MEDICARE BENEFICIARY (SLMB)**

Effective: 01/01/2006

Cross Reference: MEH 8.1.6

Group Size	OLD Limit (120%)	NEW Limit (120%)
1	\$957.00	<b>\$980.00</b>
2	\$1,283.00	<b>\$1,320.00</b>

**SPECIFIED LOW-INCOME MEDICARE BENEFICIARY PLUS (SLMB +)**

Effective: 01/01/2006

Cross Reference: MEH 8.1.6

Group Size	OLD Limit (135%)	NEW Limit (135%)
1	\$1,076.63	<b>\$1,102.50</b>
2	\$1,443.38	<b>\$1,485.00</b>

**MAPP**

Effective: 01/01/2006

Cross Reference: MEH 8.1.6

Income limits for MAPP are based on 250% of the FPL for applicants and recipients. Individuals above 150% of FPL may need to pay a premium in order to participate in the MAPP program.

<b>Group Size</b>	<b>OLD Limit (250%)</b>	<b>NEW Limit (250%)</b>	<b>OLD MAPP Cutoff Premium Payment (150%)</b>	<b>NEW MAPP Cutoff Premium Payment (150%)</b>
1	\$1,993.75	<b>\$2,041.67</b>	\$1,196.25	<b>\$1,225.00</b>
2	\$2,672.92	<b>\$2,750.00</b>	\$1,603.75	<b>\$1,650.00</b>
3	\$3,352.08	<b>\$3,458.33</b>	\$2,011.25	<b>\$2,075.00</b>
4	\$4,031.25	<b>\$4,166.67</b>	\$2,418.75	<b>\$2,500.00</b>
5	\$4,710.42	<b>\$4,875.00</b>	\$2,826.25	<b>\$2,925.00</b>
6	\$5,389.58	<b>\$5,583.33</b>	\$3,233.75	<b>\$3,350.00</b>
7	\$6,068.75	<b>\$6,291.67</b>	\$3,641.25	<b>\$3,775.00</b>
8	\$6,747.92	<b>\$7,000.00</b>	\$4,048.75	<b>\$4,200.00</b>
9	\$7,427.08	<b>\$7,708.33</b>	\$4,456.25	<b>\$4,625.00</b>
10	\$8,106.25	<b>\$8,416.67</b>	\$4,863.75	<b>\$5,050.00</b>
For each additional person	+ \$679.17	<b>+ \$708.33</b>	+ \$407.50	<b>+ \$425.00</b>

**OBRA CHILDREN (AT LEAST 6 BUT NOT 19 YEARS OLD)**

Effective: 2/01/2006

Cross Reference: MEH 8.1.6

<b>Group Size</b>	<b>OLD Limit (100%)</b>	<b>NEW Limit (100%)</b>	<b>Group Size</b>	<b>OLD Limit (100%)</b>	<b>NEW Limit (100%)</b>
1	\$797.50	<b>\$816.67</b>	6	\$2,155.83	<b>\$2,233.33</b>
2	\$1,069.17	<b>\$1,100.00</b>	7	\$2,427.50	<b>\$2,516.67</b>
3	\$1,340.83	<b>\$1,383.33</b>	8	\$2,699.17	<b>\$2,800.00</b>
4	\$1,612.50	<b>\$1,666.67</b>	9	\$2,970.83	<b>\$3,083.33</b>
5	\$1,884.17	<b>\$1,950.00</b>	10	\$3,242.50	<b>\$3,366.67</b>
			for each person over 10	+ \$271.67	<b>+ \$283.33</b>

### **HEALTHY START (HS) AND HEALTHY START PRESUMPTIVE ELIGIBILITY (PE) (<6 and Pregnant women)**

Effective: 02/01/2006

Cross Reference: (HS) MEH 8.1.6

<b>-Group Size</b>	<b>OLD Limit HS/PE CAT NDY (133%)</b>	<b>NEW Limit HS/PE CAT NDY (133%)</b>	<b>Group Size</b>	<b>OLD Limit HS/PE CAT NDY (133%)</b>	<b>NEW Limit HS/PE CAT NDY (133%)</b>
1	\$1,060.68	<b>\$1,086.17</b>	6	\$2,867.26	<b>\$2,970.33</b>
2	\$1,421.99	<b>\$1,463.00</b>	7	\$3,228.58	<b>\$3,347.17</b>
3	\$1,783.31	<b>\$1,839.83</b>	8	\$3,589.89	<b>\$3,724.00</b>
4	\$2,144.63	<b>\$2,216.67</b>	9	\$3,951.21	<b>\$4,100.83</b>
5	\$2,505.94	<b>\$2,593.50</b>	10	\$4,312.53	<b>\$4,477.67</b>
			each person over 10	+ \$361.32	<b>+ \$376.83</b>

<b>Group Size</b>	<b>OLD Limit HS/PE MED NDY (185%)</b>	<b>NEW Limit HS/PE MED NDY (185%)</b>	<b>Group Size</b>	<b>OLD Limit HS/PE MED NDY (185%)</b>	<b>NEW Limit HS/PE MED NDY (185%)</b>
1	\$1,475.38	<b>\$1,510.83</b>	6	\$3,988.29	<b>\$4,131.67</b>
2	\$1,977.96	<b>\$2,035.00</b>	7	\$4,490.88	<b>\$4,655.83</b>
3	\$2,480.54	<b>\$2,559.17</b>	8	\$4,993.46	<b>\$5,180.00</b>
4	\$2,983.13	<b>\$3,083.33</b>	9	\$5,496.04	<b>\$5,704.17</b>
5	\$3,485.71	<b>\$3,607.50</b>	10	\$5,998.63	<b>\$6,228.33</b>
			each person over 10	+ \$502.58	<b>+ \$524.17</b>

### **FAMILY PLANNING WAIVER (FPW) AND FPW PRESUMPTIVE ELIGIBILITY (PE)**

Effective: 02/01/2006

Cross Reference: (FPW) MEH 8.1.6

<b>Group Size</b>	<b>OLD Limit FPW/FPW PE (185%)</b>	<b>NEW Limit FPW/FPW PE (185%)</b>	<b>Group Size</b>	<b>OLD Limit FPW/FPW PE (185%)</b>	<b>NEW Limit FPW/FPW PE (185%)</b>
1	\$1,475.38	<b>\$1,510.83</b>	6	\$3,988.29	<b>\$4,131.67</b>
2	\$1,977.96	<b>\$2,035.00</b>	7	\$4,490.88	<b>\$4,655.83</b>
3	\$2,480.54	<b>\$2,559.17</b>	8	\$4,993.46	<b>\$5,180.00</b>
4	\$2,983.13	<b>\$3,083.33</b>	9	\$5,496.04	<b>\$5,704.17</b>
5	\$3,485.71	<b>\$3,607.50</b>	10	\$5,998.63	<b>\$6,228.33</b>
			each person over 10	+ \$502.58	<b>+ \$524.17</b>

**BADGERCARE**

Effective: 02/01/2006

Cross Reference: MEH 8.1.6

Income limits for BadgerCare are based on 185% of the FPL for applicants and 200% of the FPL for recipients. Families above 150% of FPL will need to pay a premium in order to participate in the BadgerCare program.

<b>Group Size</b>	<b>OLD Limit Applicants (185%)</b>	<b>NEW Limit Applicants (185%)</b>	<b>OLD Limit Recipients (200%)</b>	<b>NEW Limit Recipients (200%)</b>
1	\$1,475.38	<b>\$1,510.83</b>	\$1,595.00	<b>\$1,633.33</b>
2	\$1,977.96	<b>\$2,035.00</b>	\$2,138.33	<b>\$2,200.00</b>
3	\$2,480.54	<b>\$2,559.17</b>	\$2,681.67	<b>\$2,766.67</b>
4	\$2,983.13	<b>\$3,083.33</b>	\$3,225.00	<b>\$3,333.33</b>
5	\$3,485.71	<b>\$3,607.50</b>	\$3,768.33	<b>\$3,900.00</b>
6	\$3,988.29	<b>\$4,131.67</b>	\$4,311.67	<b>\$4,466.67</b>
7	\$4,490.88	<b>\$4,655.83</b>	\$4,855.00	<b>\$5,033.33</b>
8	\$4,993.46	<b>\$5,180.00</b>	\$5,398.33	<b>\$5,600.00</b>
9	\$5,496.04	<b>\$5,704.17</b>	\$5,941.67	<b>\$6,166.67</b>
10	\$5,998.63	<b>\$6,228.33</b>	\$6,485.00	<b>\$6,733.33</b>
For each additional person	+ \$502.58	<b>+ \$524.17</b>	+ \$543.33	<b>+ \$566.67</b>

CARES uses tables for 100% of FPL in BadgerCare processing to send a 'GP' medical status for those under 100% FPL and a "B4" medical status for those falling between 100% and 150% of FPL.

<b>Group Size</b>	<b>OLD Cutoff 'GP' Med Stat (100%)</b>	<b>NEW Cutoff 'GP' Med Stat (100%)</b>	<b>OLD Cutoff Premium Payment (150%)</b>	<b>NEW Cutoff Premium Payment (150%)</b>
1	\$797.50	<b>\$816.67</b>	\$1,196.25	<b>\$1,225.00</b>
2	\$1,069.17	<b>\$1,100.00</b>	\$1,603.75	<b>\$1,650.00</b>
3	\$1,340.83	<b>\$1,383.33</b>	\$2,011.25	<b>\$2,075.00</b>
4	\$1,612.50	<b>\$1,666.67</b>	\$2,418.75	<b>\$2,500.00</b>
5	\$1,884.17	<b>\$1,950.00</b>	\$2,826.25	<b>\$2,925.00</b>
6	\$2,155.83	<b>\$2,233.33</b>	\$3,233.75	<b>\$3,350.00</b>
7	\$2,427.50	<b>\$2,516.67</b>	\$3,641.25	<b>\$3,775.00</b>
8	\$2,699.17	<b>\$2,800.00</b>	\$4,048.75	<b>\$4,200.00</b>
9	\$2,970.83	<b>\$3,083.33</b>	\$4,456.25	<b>\$4,625.00</b>
10	\$3,242.50	<b>\$3,366.67</b>	\$4,863.75	<b>\$5,050.00</b>
For each additional person	+ \$271.67	<b>+ \$283.33</b>	+ \$ 407.50	<b>+ \$425.00</b>

**SENIORCARE**

Effective: 02/01/2006  
 Cross Reference: MEH 5.16.7

**Level 1 at or below 160% of FPL**

<b>Group Size</b>	<b>OLD</b> at or below 160%	<b>NEW</b> at or below 160%
<b>1</b>	\$15,312 or lower	<b>\$15,680 or lower</b>
<b>2</b>	\$20,528 or lower	<b>\$21,120 or lower</b>

**Level 2a above 160% and at to or below 200% FPL**

<b>Group Size</b>	<b>OLD</b> above 160% - and at or below 200% of FPL	<b>NEW</b> above 160% - and at or below 200% of FPL
<b>1</b>	\$15,313 to \$19,140	<b>\$15,681 to \$19,600.00</b>
<b>2</b>	\$20,529 to \$25,660	<b>\$21,121 to \$26,400.00</b>

**Level 2b Income above 200% - and at or below 240% of FPL**

<b>Group Size</b>	<b>OLD</b> above 200% - and at or below 240% of FPL	<b>NEW</b> above 200% - and at or below 240% of FPL
<b>1</b>	\$19,141 to \$22,968	<b>\$19,601.00 to \$23,520</b>
<b>2</b>	\$25,661 to \$30,792	<b>\$26,401.00 to \$31,680</b>

**Level 3 Annual income is above 240% of the FPL**

<b>Group Size</b>	<b>OLD</b> above 240% of the FPL	<b>New</b> above 240% of the FPL
<b>1</b>	\$22,969 or greater	<b>\$23,521 or greater</b>
<b>2</b>	\$30,793 or greater	<b>\$31,681 or greater</b>

**CONTACTS**

BEM CARES Information & Problem Resolution Center

★Program Categories – FS – Food Stamps, MA – Medicaid, SC – Senior Care, CTS – Caretaker Supplement, CC – Child Care, W-2 – Wisconsin Works, FSET – Food Stamp Employment and Training, CF – Children First, EA – Emergency Assistance, JAL – Job Access Loan, JC - Job Center Programs, RAP – Refugee Assistance Program, WtW – Welfare to Work, WIA – Workforce Investment Act, Other EP – Other Employment Programs.